

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
 Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND
 CAMPAIGN DISCLOSURE BOARD
 2010 JAN 19 AM 9:36

COMMITTEE NAME (Must be same as on Statement of Organization)	
Conaway for City Council	
IMPORTANT: Indicate by # type of committee you are reporting for: <u>6</u> (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue	
CANDIDATE COMMITTEES ONLY:	
Candidate Name Linda Conaway	Political Party (If applicable)
Office Sought City Council - City of Webster City	District (if Senate or House)

FORM DR-2 (Rev. 12/2009)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Patricia A. Malaise
 SIGNATURE OF PERSON FILING REPORT

515-832-4180
 TELEPHONE

1-18-10
 DATE SIGNED

I AM FILING A DR - 2 Disclosure Summary REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
 (report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
November 3, 2009
 County & Local Committees, enter County in which Election is held
Hamilton

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$	112.09
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		2,100.00
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		2,226.15
Schedule F: Loan Repayments total (Attach Schedule F)		1,050.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero)	\$	0.00
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	1,050.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Conaway for City Council

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-26-09	ID# CK#	Don Bottorff 407 E. Dubuque St. Webster City, IA 50595		\$50.00	<input type="checkbox"/>
10-26-09	ID# CK#	Scott & Terri Bargfrede 2216 N. Terrace Drive Webster City, IA 50595		100.00	<input type="checkbox"/>
10-26-09	ID# CK#	Ron & Kathy Birkostrand 625 Second St Webster City, IA 50595		200.00	<input type="checkbox"/>
10-26-09	ID# CK#	Dean & Adele Bowden 626 Elm St. Webster City, IA 50595		100.00	<input type="checkbox"/>
10-26-09	ID# CK#	Linda Groves 1504 Sparboe Ct. Webster City, IA 50595		50.00	<input type="checkbox"/>
10-26-09	ID# CK#	Dave Taylor 2218 Kamen Court Webster City, IA 50595		100.00	<input type="checkbox"/>
10-26-09	ID# CK#	Phil Voge 1001 N. Terrace Drive Webster City, IA 50595		50.00	<input type="checkbox"/>
10-26-09	ID# CK#	K Harfst. 704 South St. Webster City, IA 50595		50.00	<input type="checkbox"/>
10-26-09	ID# CK#	Gerald Peterson 1607 College St. Webster City, IA 50595		100.00	<input type="checkbox"/>
10-26-09	ID# CK#	Ken & Patricia Malaise 607 N. Des Moines St. Webster City, IA 50595		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 900.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Conaway for City Council

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-26-09	ID# CK#	Gregg Olson 1009 Water St. Webster City, IA 50595		\$ 100.00	<input type="checkbox"/>
10-26-09	ID# CK#	Kevin & Trish Bahrenfuss 1325 Des Moines St. Webster City, IA 50595		25.00	<input type="checkbox"/>
10-26-09	ID# CK#	John Bohan 1903 Beach St Webster City, IA 50595		25.00	<input type="checkbox"/>
10-26-09	ID# CK#	Misc. Pass the Hat - donations under \$25 each		400.00	<input type="checkbox"/>
11-05-09	ID# CK#	Misc. Pass the Hat - donations under \$25 each		200.00	<input type="checkbox"/>
11-17-09	ID# CK#	Dr. Joe Latella 614 Elm St. Webster City, IA 50595		100.00	<input type="checkbox"/>
11-17-09	ID# CK#	Mr. Lynn Jacox 1907 Beach Street Webster City, IA 50595		100.00	<input type="checkbox"/>
11-17-09	ID# CK#	Rev & Gerald Huisman 305 Bicentennial Court Webster City, IA 50595		50.00	<input type="checkbox"/>
11-17-09	ID# CK#	Misc. Pass the Hat - donations under \$25.00 each		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1200.00

TOTAL (If last page of this schedule)

\$ 2100.00

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Conaway for City Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-5-09	ID# CK#42233	Strategic Media P.O. Box 2817 Waterloo, IA 50704	Linda Conaway Flier - printed and mailed	\$ 1136.15
11-17-09	ID# CK# 42363	McKinley Bailey 521 Elmhurst Drive Webster City, IA 50595	Loan repayment for Teamwork flier - printed and mailed	1050.00
1-10-10	ID# CK# 5402	Daily Freeman Journal 720 Second St. Webster City, IA 50595	Thank you ad	40.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2226.15
TOTAL (if last page of this schedule)				\$ 2226.15

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(l).)

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(for Schedule H)

FOR INSTRUCTIONS, SEE BACK OF FORM

RESET

SCHEDULE

F

(Rev. 02/08)

LOANS
RECEIVED
& REPAYED

COMMITTEE NAME (Must be same as on Statement of Organization)

Conaway for City Council

☐ CHECK THIS BOX IF
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ \$1050.00**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I)

\$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
11-17-09	McKinley Bailey 521 Elmhurst Dr. Webster City, IA 50585		\$ 1050.00

TOTAL CASH REPAYMENTS (PART II)

\$ 1050.00

From Schedule E -- TOTAL LOANS FORGIVEN

\$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 0.00

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(for Schedule F)